

If you want to file a...

# SMALL CLAIMS REQUEST TO TRANSFER TO THE CIVIL DIVISION



# MARICOPA COUNTY JUSTICE COURT

Either party may request to transfer a small claims case to the justice court's civil division prior to **TEN** (work) days before the scheduled hearing.

# THE PARTY REQUESTING THE TRANSFER TO THE CIVIL DIVISION WILL BE ASSESSED THE CIVIL FILING FEE.

Also, if this is your first pleading, you will pay an answer fee.

### Please STOP...



If you are attempting to file the request within ten (work) days of the hearing date.

### Please PROCEED...



If you are filing the request at least ten (work) days prior to the hearing date.

## **FORMS Needed:**



Small Claims Request for Transfer Case Designated as a Small Claims to the Civil Division

# **INSTRUCTIONS:**

- 1) Complete the form.
- 2) Make one copy for yourself.
- 3) File the original form with the court clerk and pay the fee(s).

IT IS IMPORTANT TO KEEP THE COURT APPRISED OF ANY CHANGE IN ADDRESS A NOTICE OF CHANGE OF ADDRESS form must be filed with the court when a party changes their address.

Visit us at <a href="https://www.superiorcourt.maricopa.gov/justicecourts">www.superiorcourt.maricopa.gov/justicecourts</a> for additional filing information and online forms.

Filing Party Name		<u> </u>
Address		<del></del>
Maricopa County	Justice	Courts, State of Arizona
		CASE NUMBER:
Plaintiff(s) Name / Address		Defendant(s) Name / Address
REQUEST TO TRANSFER CASE D	ESIGNATED	AS A SMALL CLAIM TO THE CIVIL DIVISION
	e the schedule	eard in the Small Claims Division and request that it be
transferred to the Civil Division of the Justice Co		intiff Defendant
NOTICE OF TRANSFER TO THE C	IVIL DIVISIO	N AND NOTICE OF REQUIRED DISCLOSURE
<ul> <li>Defendant has requested that this case be</li> <li>Defendant has obtained counsel.</li> <li>A counterclaim exceeding the jurisdiction o</li> </ul>		
<b>THIS MATTER IS</b> transferred to the Civil Division The new case number assigned for all further file.		
☐ The Small Claims Hearing scheduled for _	•	-
YOU ARE REQUIRED by Arizona Rules of C party on or before 5:00 PM on  ☐ A Disclosure Statement form is enclosed for		6, to exchange a disclosure statement with the opposing litigant.
Date:	lustice of the	
I CERTIFY that I mailed a copy of this NOTICE OF T	Justice of the RANSFER an	d NOTICE OF REQUIRED DISCLOSURE to:
☐ Plaintiff at the above address		Defendant at the above address
Date:	Ву:	Clerk

Plaintiff or Attorney for Plaintiff					
Address					
Maricopa County Justice Courts, State of Arizona					
	CASE NUMBER:				
Plaintiff(s) Name / Address	Defendant(s) Name / Address				
DISCLOSURE	STATEMENT				
INSTRUCTIONS:					
The Arizona Rules of Civil Procedure require that reach pavailable concerning this case. Please refer to Rule 26 disclosure.					
This DISCLOSURE STATEMENT provides a format for you to ma	ake such disclosure. This DISCLOSURE STATEMENT must be				
completed and exchanged with all parties within 40 days of	the filing of the ANSWER. You should also be prepared to				
provide the other party with a copy of your disclosure at the	e PRETRIAL CONFERENCE. The court will notify you of the				
date and time of the PRETRIAL CONFERENCE when it has bee	n scheduled.				
During the course of the action, any new information must a	also be exchanged. Failure to comply could result in any of				
the following consequences: 1) dismissal of this case; 2)	a default judgment entered; or 3) your new information or				
exhibits excluded from being presented at trial.					
I am the					
Pursuant to Rule 26.1(b)(1), ARCP, hereby discloses the	following and certifies that such disclosure includes all				
information in his / her possession, custody and control, as	well as any information which can be determined, learned				
or obtained by reasonable investigation:					

1.	what are the	lacts suppo	orung the claim.		
2.		Bring a copy of these		show how you calculated the dollar va bits to any Pretrial Conference which	
3.	What law supports y	your claim(s):			
4.	<u>List of Witnesses</u> undersigned party e			phone numbers of any witnesses w mmary of their expected testimony).	/hom the
<u>Name</u>		<u>Address</u>	<u>Phone</u>	<u>Testimony</u>	

- 5. <u>List of Documents and Other Information</u>
  - A. Any documents or evidence which would be available for review by the court which supports your claim(s). Bring a copy of these documents / exhibits or a description of the evidence to any Pretrial Conference which may be scheduled.
  - B. Any other information, documents or witnesses of which you may have knowledge, pertaining to this matter.

1.						
2.						
3.						
4.						
5.						
6.						
7.						
I state under penalty of perjury that the foregoing is true and correct.						
Dat	e:					
I CE	I CERTIFY that I mailed / delivered a copy of this DISCLOSURE STATEMENT to:					
	Plaintiff at the above address or  Plaintiff's  Defendant at the above address or  Defendant's attorney					
Date	By: Plaintiff / Defendant					